

UNITED STATES NATIONAL STAGE WORKSHEET (DO/EO)

Charitta Burt, Paralegal

U. S. Application No. 101 34477

Publication Date 2004, 04/08/98

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Copy of ISR \_\_\_\_\_, Copy of IPER \_\_\_\_\_

Assignee information: \_\_\_\_\_

Priority Info: Country \_\_\_\_\_ No. \_\_\_\_\_ date \_\_\_\_\_ MORE

Correspondence checked: 24737 deposit account 14-1270

Inventor Residence city: \_\_\_\_\_, state and/or country \_\_\_\_\_ citizenship: \_\_\_\_\_

International Application No. PCT DB2005, 004992 Language Eng

Copy in International Application: \_\_\_\_\_; Translation: yes \_\_\_\_\_ no \_\_\_\_\_ Spec.pg no. \_\_\_\_\_

371 Filing Fees: \_\_\_\_\_; US IPER meets Art. 33(2)-(3) Low fee applies: \_\_\_\_\_

Total Claims: \_\_\_\_\_ Chargeable \_\_\_\_\_ Independent \_\_\_\_\_ multiple \_\_\_\_\_

Number of drawing Sheets: \_\_\_\_\_ Foreign language: \_\_\_\_\_

Oath/Declaration: \_\_\_\_\_ signed \_\_\_\_\_ unsigned \_\_\_\_\_ defective \_\_\_\_\_ completed \_\_\_\_\_ Power of Attorney: \_\_\_\_\_

Small entity fee: \_\_\_\_\_ SME document yes \_\_\_\_\_ no \_\_\_\_\_

Bio Seq. Diskette: \_\_\_\_\_ entered \_\_\_\_\_ Bio Seq. Listing: \_\_\_\_\_ statement \_\_\_\_\_

Article 19 Amendment: \_\_\_\_\_; replaced by Article 34 Amdt. \_\_\_\_\_

Copy ISA References \_\_\_\_\_

Copy of IPER: \_\_\_\_\_; Annexes: \_\_\_\_\_ entered \_\_\_\_\_ not entered \_\_\_\_\_ Text sequence improper \_\_\_\_\_

Preliminary Amendment(s): \_\_\_\_\_ date: \_\_\_\_\_; 2<sup>nd</sup> amendment date \_\_\_\_\_

IDS: \_\_\_\_\_ DATE: \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ DATE \_\_\_\_\_

Request for Immediate Examination: \_\_\_\_\_

Substitute Specification: \_\_\_\_\_ date: \_\_\_\_\_

Assignment: ✓ forwarded to Assignment branch date: 10.15.05

Priority Document(s): \_\_\_\_\_ Number of copies included \_\_\_\_\_

Date of 35 USC Receipt of Request: \_\_\_\_\_

Notes:

Date Completion USC 371 Requirements: \_\_\_\_\_

Notice of Missing Requirements: \_\_\_\_\_

Notice of Defective Response: \_\_\_\_\_

Notice of Acceptance: \_\_\_\_\_

Notice of Abandonment: \_\_\_\_\_ Petition to Revive: \_\_\_\_\_

Other forms: \_\_\_\_\_ Extension of time: Number of months \_\_\_\_\_